COMBINED DECLA APPLICATION WIT	P33167 First Named Charan	ATTORNEY'S DOCKET P33167 First Named Inventor: Charanjit BOUNTRA							
( ) Declaration submitted with initial		e if known:							
				Filing Da	ite				
				Group Ar	t Unit:				
As below named inventor. I hereby declare that:									
My residence, post office address and citizenship are as stated below next to my name.									
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
NOVEL COMPOUNDS									
the specification of which (check only one item below):									
[ ]is attached hereto. OR [ x ] was filed on as United States application Serial No or PCT International  Application Number PCT/EP03/14776 filed 17 December 2003 and was amended on (MM/DD/YYYY) (if applicable)									
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.									
I hereby claim foreign priority berinventor's certificate or 365(a) of States of America, listed below an certificate or of any PCT internation PRIOR FOREIGN AND ANY I	nefits under 35 U any PCT internati d have also ident onal application l	S.C. §119 (a)-(d) or §36 ional application which diffied below, by checking naving a filing date befor	designated at least one country of the box, any foreign application to that of the application on which	s) for patent her than the for patent or	United r inventor's				
Prior Foreign Application	Country		Foreign Filing Date		PRIORITY				
Number (s) 1. 0229808.1	GB		(MM/DD/YYYY)) 20 December 2002		CLAIMED X				
2.	20 December								
3.		,							
<b>4</b> . 5.			· · · · · · · · · · · · · · · · · · ·						
	itle 35 United St	ates Code \$110(a) of an	/ United States provisional and	nation(a) li-t	ad halows				
Application No.	ine 33, Office St	rates Code §119(e) of any United States provisional application(s) listed below: Filing Date (MM/DD/YYYY)							
Application No.		· ining Date	(MANDOLLILL)						
2.									

## COMBINED DECLARATION FOR UTILITY or DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY Continued

GlaxoSmithKline

709 Swedeland Road

ADDRESS

ATTORNEY'S DOCKET NUMBER

King of Prussia

P33167

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United

	or PCT International is material to patent PCT international fi	at is listed below and, insorar as the subject mal application in the manner provided by the first ability as defined in 37 C.F.R. §1.56 which becoming date of this application:	t paragraph of 35 U came available betwo	S.C. §112, I acknown the filing date of	wledge the duty to disclo	ose information which		
PRIOR	U.S. PARENT	APPLICATION or PCT PARENT A	PPLICATION					
				PATENTED	STATUS (Check one)			
U.S.	Parent Application or Number		ent Parent Filing Date (MM/DD/YYYY)		PENDING	ABANDONED		
	****							
POWER	OF ATTORNEY	: As a named inventor, I hereby appoint the	he practitioners as	ssociated with the	Customer Numbers p	rovided below to		
prosecut	e this application ar	nd to transact all business in the Patent and Customer Number 20462	l Trademark Offic	e connected there	with			
Address all correspondence and telephone calls to Customer Number 20462				Direct Telephone Calls to:				
7144103	un corresponden		<u></u>			Soma Simon 610 270 5019		
are belie made ar	eved to be true; ar e punishable by f	tatements made herein of my own knownd further that these statements were make or imprisonment, or both, under 18 tion or any patent issuing thereon.	ade with the kno	owledge that wil	lful false statement	s and the like so		
1-00	FULL NAME	FAMILY NAME	FIRST GIVEN NAMI	E	SECOND GIVEN NAME	INITIAL		
		BOUNTRA	<u>Charanjit</u>		Date:			
		INVENTOR'S SIGNATURE Signature				======================================		
0 RESIDENCE & CITY		CITY	STATE OR FOREIGN COUNT		COUNTRY OF CITIZENSHIP  GB  GB			
	CITIZENSHIP	Harlow	Essex, GB		GB STATE & ZJP CODE/CO			
	POST OFFICE	POST OFFICE ADDRESS GlaxoSmithKline	King of Pruss	cia	Pennsylvania 19			
1	ADDRESS	709 Swedeland Road	King of Frus.	314	l chinsylvania 15	.00, 00		
2 (15)	FULL NAME	FAMILY NAME	FIRST GIVEN NAMI	E	SECOND GIVEN NAME/	INITIAL		
2-90	OF INVENTOR	DAVIS	John		Beresford			
	INVENTOR'S SIGNATURE	Signature Sun B	· Sub Ds.			Date: 23 (01 ( 2 >> 4		
0	RESIDENCE &	CITY	STATE OR FOREIG	N COUNTRY	COUNTRY OF CITIZENS	SHIP EBX		
	CITIZENSHIP	Harlow POST OFFICE ADDRESS	Essex, GB		STATE & ZIP CODE/CO			
2	POST OFFICE ADDRESS	GlaxoSmithKline 709 Swedeland Road	King of Pruss	sia	Pennsylvania 19			
	FULL NAME	FAMILY NAME	FIRST GIVEN NAMI	E	SECOND GIVEN NAME/	INITIAL		
3-90	OF INVENTOR	RAMI	Harshad		Kantilal			
	INVENTOR'S SIGNATURE	Signature Harshad	Raur		Date 22	an-04		
0	RESIDENCE &	CITY	STATE OR FOREIG	N COUNTRY	COUNTRY OF CITIZENS	GBX.		
	CITIZENSHIP	Harlow POST OFFICE ADDRESS	Essex, GB		STATE & ZIP CODE/CO			
3	POST OFFICE ADDRESS	GlaxoSmithKline	King of Prus	sia	Pennsylvania 19	406, US		
,	ADDICESS	709 Swedeland Road		izing of a lussia				
(0-i)			FIRST GIVEN NAME		SECOND GIVEN NAME/INITIAL			
4-10	OF INVENTOR	THOMPSON	Mervyn					
	INVENTOR'S	Signature our Rouge				27TM JAN - 2004		
	SIGNATURE	CITY	STATE OR FOREIG	N COUNTRY	COUNTRY OF CITIZENS	SHIP		
0	RESIDENCE & CITIZENSHIP	Harlow	Essex, GB	., 500	GB	GBX		
ł	POST OFFICE	POST OFFICE ADDRESS	CITY		STATE & ZIP CODE/CO			

King of Prussia